


Credit Disclosure	
Interest Rates and Interest Charges	
Annual Percentage Rate (APR) for Purchases.	8.90% to 17.90%*
APR for Balance Transfers	8.90% to 17.90%*
APR for Cash Advances	8.90% to 17.90%*
*Rates shown are non-variable and subject to change. Your rate may vary based on individual creditworthiness and our underwriting standards.	
Penalty APR and When it Applies	NONE
How to Avoid Paying Interest on Purchases	We will not charge you any interest on purchases if you pay your entire balance by the due date each month. The Interest Charge on cash advances begins from the date you obtained the cash advance. The Interest Charge on balance transfers begins from the date the transaction is posted to your account.
Minimum Interest Payment	If you are charged interest, the charge will be no less than \$0.00.
For Credit Card Tips from the Federal Reserve Board	To learn more about factors to consider when applying for or using a credit card, visit the Web site of the Federal Reserve Board at http://www.federalreserve.gov/creditcard .
Fees	
Annual Fee	NONE
Transaction Fees	Balance Transfer Fee: NONE Cash Advance Fee: NONE Foreign Transaction Fee: Up to 1.00% of each transaction in US dollars.
Penalty Fees	Late Payment Fee: Up to \$25.00 Over-the-Credit Limit Fee: NONE Returned Payment Fee: Up to \$27.00
Other Fees	Live Pay-By-Phone Fee: Up to \$5.00

How we will calculate Your Balance: We will use a method called "average daily balance (including new purchases)". See your account agreement for more details.

Billing Rights: Information on your rights to dispute transactions and how to exercise those rights is provided in your account agreement.



**FULTON
TEACHERS'**
CREDIT UNION
3604 Atlanta Avenue
Hapeville, GA 30354
(404) 768-4980
www.ftcu.com



THE PLATINUM VISA® FOR EVERYDAY LIFE



**FULTON
TEACHERS'**
CREDIT UNION

Apply Today!

NON-VARIABLE RATE.

NO ANNUAL FEE.

NO BALANCE TRANSFER FEE.

PLATINUM Visa® Credit Card

Account Choice

PLATINUM VISA® Credit Card

You request Additional Card(s) in the name of: _____

Applicant

Home Phone Number _____ Cell _____

Account# _____ Daytime Phone Number _____

Name _____ Limit Request \$ _____ You must have verifiable income.

Address _____ **Co-Applicant**

Social Security Number _____ Name _____ Date of Birth _____

Employer _____ How Long? _____ Date of Birth _____

Annual Salary \$ _____ Employer _____ How Long? _____

Mortgage/Rent Payment \$ _____ Annual Salary \$ _____

READ THIS STATEMENT BEFORE SIGNING. By returning this application to the Credit Union, I/we promise that everything stated herein is correct to the best of my/our knowledge and that I/we authorize the Credit Union to obtain credit reports in connection with this application for credit and for any update, renewal or extension of the credit received. I/we understand that the Credit Union will rely on both the representations I/we make in this application and the contents of any credit report it obtains when deciding whether to grant the credit requested. I/we agree to immediately notify you of changes to any of the information provided in this application. I/we agree that my/our account will be subject to the terms and conditions of all applicable Agreement and Disclosure Statement that will accompany my Card(s) when issued; and that a photocopy or facsimile of this application shall be as binding as the original.

Authorized User/Card. I/we also request that an additional card be issued in the name of the Authorized User identified below. The undersigned specifically acknowledge their responsibility for all purchases and/or cash advances made by the Authorized User or anyone the Authorized User allows to use any card(s) issued in connection with the credit card account. The Borrower acknowledges his or her responsibility for all purchases and cash advances made or authorized by the Authorized User.

Applicant's Signature
Date
Co-Applicant's Signature
Date
Authorized User -- Print Name(s)

SECURITY AGREEMENT AND PLEDGE. By signing this application, acceptance or authorized use of any credit card(s) issued, I/we pledge our shares per any other agreements with the Credit Union to secure payment of my/our obligations on this account. Shares mean all deposits in any share savings, share draft, club, or other account(s), whether jointly or individually held, all of which are deemed "general deposits," for the purpose of your pledge. Additional Security: I/we understand that collateral securing other loans will secure this account; and that property purchased with my/our credit card(s) will also secure this account.

Balance Transfer Option

Complete one transfer request for each credit card balance you would like to pay off. Please attach the payment coupon from your recent statement, showing remittance address and account number. The total value of the transfer requests cannot exceed your credit line. The accounts from which you transfer the entire balance will not be automatically closed after the transfer is complete. It is your responsibility to close the account(s), if you choose.

Account# _____	Account# _____
Credit Issuer _____	Credit Issuer _____
Issuer Address _____	Issuer Address _____
City _____	City _____
State _____ Zip _____	State _____ Zip _____
Amount to be transferred \$ _____	Amount to be transferred \$ _____